Individual Directed Goods and Services (IDGS) Definitions Chart

TABLE 1: Allowable IDGS Expenses

IDGS Category	Available To Individuals in Certified Residences?	Description	Qualifications	Pricing Parameters
Camp	• No	• Funding may be requested for the cost of camp in a self-directed plan for a camp that is able to provide the needed safeguarding supports and supports to achieve the person's valued outcomes. • Camps can be either focused on supporting individuals with disabilities or camps that are available to the general public. • Directly related to a valued outcome.	• For a camp, a state, city, or county health department permit to operate legally and must operate in compliance with Subpart 7- of the State Sanitary Code requirements. A permit is issued only when the camp is in compliance with the state's health regulations.	• Not to exceed published fees • Annual cap $4000/year.
Community Classes & Publicly Available Training/Coaching	• Yes	• Classes available to the general public in any subject area that relates to a person's valued outcomes (Art, Dance, Exercise, Cooking, Computer Training, Etc.) • Sessions with a private trainer (physical education/exercise) may be covered as long as the service relates to a valued outcome). • Classes must be related to a habilitative need in the individual's person-centered plan and not just for recreational purposes. • Classes must be non-credit bearing; IDGS funding is for non-matriculating students.		• Not to exceed the published fees as outlined in the entity's published course fees.

Coaching/ education for parent(s), spouse and advocates involved in the person's self-directed services	• No	• IDGS funding is for Parent/Spouse/Advocate to attend/participate in educational opportunities (not covered by other public programs) that assist participants and those close to them to achieve goals established in the individual's service plan. • Self-directing individual is over age 18 (Under 18 is through FET). • May Include registration, and conference fees.		• Annual cap $500/year based on Family Education & Training (FET) pricing parameters in 1915(c) HCBS waiver. • Reimbursement is only up to FET reimbursement levels; overnight lodging or travel not allowable.
Clinician Consultants, Independent Contractors – (Non-Direct Service Provision -- Clinical Consultation Specialties)	• Yes, but only related to self-directed services	• Consultants/contractors are clinical specialists who are hired for the following purpose: ▪ Evaluate an individual's habilitation plan ▪ Training self-hired staff in delivering the self-directed plan (NOTE: State Plan clinic services may not be used to train and consult with paid caregivers. To the extent that IDGS Consultation services are being used to train self-hired staff, who might otherwise not have such resources available to them, it will not duplicate State Plan services) ▪ Evaluation of the effectiveness of the self-hired staff in carrying out the services in the self-directed plan • Consultants/contractors services cannot replicate any service available through a third-party insurer, the Medicaid State Plan or the HCBS Waiver Service. • Consultants must provide a written outline of services to be delivered prior to approval; consultants must provide an annual update of progress/provision of service and need to continue.	• A consultant/ contractor who is a member of a profession that is under the jurisdiction of the NYSED Office of the Professions, must meet all licensure or registration requirements as verified at the following site: http://www.op.nysed.gov/opsearches.htm • Discipline authorized under Article 16 clinic regulations (Psychology, OT, PT, SLP, social work, nursing, nutrition/ dietetics, rehabilitation counseling)	The hourly amount paid to the therapist cannot exceed the 90th percentile for the hourly wage for the therapeutic or consultant's professional discipline (i.e., the standard occupational code) published by the Bureau of Labor Statistics (BLS), see http://www.bls.gov/soc/home.htm.

Clinician (Direct-Provision of Therapies/ Therapeutic Activities Not Otherwise Funded in the State Plan)	• Yes, but only related to self-directed services	Hippo Therapy: A treatment strategy by physical therapists, occupational therapists, and speech language pathologists that is incorporated into the professional's plan of care to achieve functional outcomes. Hippo therapy is a medical treatment, not a recreational program of teaching a progressive riding and horsemanship skill. • Funding may be requested for hippo therapy in a self-directed plan by individuals with cerebral palsy and other neurological disorders that permanently affect body movement and muscle coordination. • Funding may be requested for hippo therapy in a self-directed plan by Individuals with cerebral palsy and other neurological disorders that permanently affect body movement and muscle coordination. Therapeutic Riding & Equine-assisted Activities • Therapeutic Riding and equine-assisted activities address and contribute positively to the cognitive, physical, emotional and social well-being of individuals with special needs. Therapeutic riding and equine-assisted activities are taught by a PATH International Instructor to individuals five (5) years old and older. • The PATH instructor will provide written policies on the eligibility and discharge of individual, written documentation of the initial evaluation of the individual and written progress notes for the individual. The initial evaluation of abilities establishes the appropriate goals and objectives for the individual and the progress notes document the achievements and problem areas. The discharge should be supported by appropriate documentation that shows a baseline for goals and objectives and a recommended course	Hippo Therapy • An individual providing hippo therapy **must** be a NYS licensed Occupational, Physical or Speech Therapist; if he/she is an Assistant in one of those categories (OTA, PTA) then he/she **must** be working under an OT or PT. Therapeutic Riding & Equine Assisted Activities • PATH International Instructor must carry a certification business card with an annual expiration date, and must requalify each year to be certified	The hourly amount paid to the therapist cannot exceed the 90th percentile for the hourly wage for the therapeutic or consultant's professional discipline (i.e., the standard occupational code) published by the Bureau of Labor Statistics (BLS), see http://www.bls.gov/soc/home.htm.

Clinician (Direct-Provision of Therapies/ Therapeutic Activities Not Otherwise Funded in the State Plan)	• Yes, but only related to self-directed services	of action when continued participation is no longer appropriate. Instructors communicate with the individual/parents/guardians at the start and at the end of the session (6-8 weeks) to discuss the goals, objectives, accomplishments and the next steps, and best practice includes mid-session meetings and informal discussions each time the individual rode. • Individuals may engage in horseback riding and equine related activity as therapy or through a community class that is available to the general public. When individuals engage in community classes the activity must be in support of a valued outcome and paid based on published class prices. • Riding stables may offer both public classes and equine related therapies. Based on the purpose of the activity the rates and fees must be supported for billing purposes consistent with the guidance defined in this chart and other related guidance. <u>Aquatic, Art, Massage, Music, Play Therapy:</u> • <u>Funding for **massage therapy** may</u> be included in a self-directed plan when the service has been prescribed by the individual's medical doctor to ameliorate a specific medical diagnosis/condition for which massage therapy has recognized efficacy. Funding is not available to support vague goals such as "promote well-being," "reduce stress," or "promote relaxation." There must be a corresponding valued outcome in the individual's plan. • Funding for **music therapy** may be included in a Self Direction Budget only if there is a specific communication or audiological requirement for the service as stated in the plan and justified by the individual's medical doctor or licensed clinician, and a corresponding valued outcome.	<u>Aquatic, Art, Massage, Music, Play Therapy:</u> • A consultant/ contractor who is a member of a profession that is under the jurisdiction of the NYSED Office of the Professions, must meet all licensure or registration requirements as verified at the following site: <u>http://www.op.nysed.gov/opsearches.htm</u>	

Clinician (Direct-Provision of Therapies/ Therapeutic Activities Not Otherwise Funded in the State Plan)	• Yes, but only related to self-directed services	**All Services – Ordering, Treatment Plan & Documentation Requirements** • The request for funding **must** be accompanied by a written prescription from the individual's medical doctor with a goal of treating a specific medical diagnosis/ condition and shall support a specific valued outcome. • The therapist shall conduct an initial assessment, report findings, and propose a treatment plan. These documents are not required as part of the request for funding since these documents are not likely to be developed until after treatment begins. The treatment plan shall outline treatment goals, proposed therapeutic activities, and their anticipated frequency and duration. The treatment plan shall acknowledge the individual's personal goals and support a specific valued outcome(s) described in the ISP/Life Plan. The treatment plan becomes active upon the referring/prescribing medical doctor's review and written approval. • On-going treatment services shall be delivered only in accordance with the approved treatment plan. Each session shall be documented with a brief treatment note outlining the therapeutic services/activities performed, duration, and response to treatment. • The therapist shall provide periodic (at least semi-annual) progress reports to the referring/ prescribing medical doctor. Such report shall review the individual's progress toward goals and the efficacy of services to date; it shall propose any necessary updates/ revisions to the treatment plan. The medical doctor shall review the individual's progress and, if warranted, approve the updated treatment plan and continuation of services in writing.		

Health Club/ Organizational Memberships	• Yes	• Health club memberships; Community membership dues -- Funding for a gym, health club or other community organization membership may be included in the self-directed plan for reasons of health and fitness or community integration in accordance with the participant's valued outcomes. • Membership is for the individual only; no family memberships allowed with IDGS funding. • The club/organization must offer open enrollment to the public, and cannot be a private club with a closed membership where membership is available by invitation only. • An individual may have multiple memberships to health clubs.	• Payment not to exceed the entity's published membership dues/fees specified.	• Annual cap $1500/year.
Household-Related Items and Services	• No	• Item cannot be funded through any other funded program and may include Appliances that assist a person to live more independently (i.e., a microwave oven for someone who cannot safely use a stove or oven) • Appliance must benefit the individual and be related to a valued outcome as well as be related to health and safety. • Household support (cleaning, minor maintenance, snow removal, lawn mowing) only for individuals not living in the family home. • Note: The Community Transition Services (CTS) waiver service and funding cap remains separate from IDGS funding in this category.	• N/A	• Annual cap $1500/year.
Interpretation Services	• Yes, but only related to self-direction services	• Cannot duplicate any Medicaid funded service providers' requirement to communicate with the person, e.g., Community Habilitation, Medicaid Service Coordination, Hospitalizations • Includes language interpretation, but not translation services.	• Payment may not exceed the entity's established fees • Payment must be to a formal interpretation service	• Published fees cannot be exceeded.

Interpretation Services	• Yes, but only related to self-direction services	• Must be directly related to valued outcomes, safeguards and services identified and approved in the Self Direction Budget. In order to make the determination whether the interpretation is service related, and costs may be reimbursed, the questions to be answered are: 1. What valued outcome/safeguard is this activity in support of? 2. What service was the interpretation related to? 3. What service was actually provided? 4. Who provided the service?		
Paid Neighbor	• No	• Stipend paid to neighbor to be "on-call" to assist a person who lives independently. If the paid neighbor is called upon to provide direct services, he/she is paid an hourly wage for the delivery of self-hired or agency supported community habilitation. • The specific duties are defined in a contract signed by the paid neighbor and the Fiscal Intermediary.	• The paid neighbor staff person cannot be a family member of the person. • Must meet all requirements for background check, and training that would be required of a self-hired staff person.	• Monthly cap $800
Self-Directed Staffing Support	• Yes, but only related to self-directed services	• Assistance with scheduling self-hired staff and with assisting the person to complete staffing related paperwork. • Not to duplicate FI employer responsibilities or Broker services related to development of the person's self-directed plan. • The 'self-hired' staff person providing this support is not a staff person of a NFP agency and is not a person who is active in assisting the person with decision-making regarding his/her self-directed services (not a family-member or a member of the person's freely chosen planning team).	• All staff, volunteers and trainers are screened for criminal background and excluded provider status	• Not to exceed payment of $20/hour

Transition Programs for Individuals with IDD	• No	• Tuition for non-credit bearing transition programs for individuals with IDD who have already completed their educational program (i.e. 'aged out'). • The coursework must address a person's valued outcomes and address skill building and employment outcomes. • Programs may be provided in non-site based settings, on college campuses, but not in locations certified by OPWDD. • Coursework may include training on personal care skills, and socialization skills, but this training is provided to support vocational outcomes for the person. • To be funded via a person's Self Direction Budget, the program cannot be funded by ACCESS-VR, IDEA or other funding sources. • Services are time-limited and cannot exceed a two year timeframe. • No room and board costs are fundable.	• All staff, volunteers and trainers are screened for criminal background and excluded provider status •	• Published fees cannot be exceeded. • Per class limit for tuition is $350/course. • Where tuition is on a monthly basis, not to exceed $800/month
Transportation	• Yes, only related to self-directed services	• Funding may be requested for the cost of service related transportation that is directly related to valued outcomes, safeguards and services identified and approved in the Self Direction Budget. In order to make the determination whether transportation is service related, and costs may be reimbursed, the questions to be answered are: 1. What valued outcome/safeguard is this activity in support of? 2. What service was this transportation related to? 3. What service was actually provided? 4. Who provided the service? • Transportation costs are not reimbursed through the Self Direction Budget for transportation to and from OPWDD funded services for which transportation costs are included in the rate/fee developed or paid via billable service time.	• Vehicle must be operated by a licensed driver.	• Mileage reimbursement not to exceed standard federal mileage rate: https://www.irs.gov/newsroom/irs-issues-standard-mileage-rates-for-2019 • Reimbursement of public transportation and paratransport limited to published rates. Discounts for individuals with disabilities shall be requested, where available.

Transportation	• Yes, only related to self-directed services	• Mileage may not be reimbursed for medical appointments as this duplicates a State Plan service. • Transportation reimbursement takes several forms: 1. **Reimbursement for service related miles** may be made to: a. *Staff person* who drove his/her personal vehicle to a service related activity, b. *Participant* who drove or was driven in his/her personal vehicle to a service related activity, or c. *Friend or family* member who drove his/her personal vehicle to a service related activity. • Service related mileage may be paid from IDGS for transportation costs required for the individual to access a generic service in the community that is Medicaid reimbursable within the Self Direction Budget (directly related to a valued outcome or safeguard) regardless of whether or not there is a paid staff person present. • Mileage reimbursement covers all operating costs related to the vehicle and included in the IRS standard mileage rate standards, i.e., gas, registration, vehicle inspection, insurance, repairs & maintenance. • **Reimbursement for the cost of public transportation or paratransit**, such as bus passes, bus, taxi and train fares that is directly related to valued outcomes, safeguards and services identified and approved in the Self Direction Budget. Individuals may purchase metro cards under this category for self-hired staff providing habilitation supports as long as the card is kept in the possession of the individual and is only used during the provision of service.	• Vehicle must be operated by a licensed driver.	• Vendor transportation limited to published fees.

TABLE 2: The Following items <u>cannot</u> be funded through IDGS

Academic Tutoring	• Academic tutoring is **<u>not</u>** funded through the IDGS. This service should be pursued through the school district or college setting. Academic tutoring/homework assistance is not an appropriate task for self-hired staff.
Automatic pill dispenser/ medication system	• Available through Assistive Technology, outside the person's Self Direction Budget
Cell Phones/Telephones	• Funding for cell phones is not an allowable IDGS expense. • The SafeLink Wireless program is available to eligible individuals in New York State who receive Supplemental Security Income (SSI). • The SafeLink service in New York State allows for a cell phone and limited free minutes for a person who has a diagnosed developmental disability and receives social security benefits under SSI.
Computer Hardware	• Not allowable in IDGS
Computer Programs/Software	• Computer Software may be available through Assistive Technology, outside the person's Self Direction Budget.
Leased and Purchased Vehicles	• Leased or Purchased Vehicles **are not allowable expenses under IDGS.**
Health-Related Services, Equipment and Supplies	• Health related supplies such as food and beverage thickeners, trachea collars, disposable bed pads, wipes, incontinence products, and supplemental medications are funded through the State Plan only; not through IDGS funding.
Items and services from a vendor that present a conflict of interest	• IDGS cannot fund items or services if the purchase, as determined by OPWDD: (a) leads to significant monetary gain for an individual's support person(s); (b) provides the support person(s) with significant influence over the individual; and/or (c) constitutes a conflict of interest. As used herein, the term "support person" includes an individual's spouse, children, parents, guardians, any person engaging in sexual activity with the individual, partners residing with the individual, and/or any person who provides paid services authorized by OPWDD, including but not limited to DSPs and Support Brokers.
Parents' Activity Fees, Expenses, and Meals	• Activity fees, expenses, and meals incurred by parents of individuals **are not** reimbursed with IDGS funds and must be paid by the parents when they accompany an individual to an activity supported by his/her Self Direction Budget.

Participants' Activity Fees, Expenses, and Meals	• Activity fees, expenses, and meals incurred by individuals **are not** reimbursed with IDGS funds and must be paid by the individual or his/her family.
Personal Monitoring Systems	• Available through State Plan
Staff Activity Fees, Expenses, and Meals	• Activity fees, expenses, and meals incurred by self-hired staff supporting individuals are not reimbursed with IDGS funds, but may be funded through Other Than Personal Services.
Direct Clinician service delivery and Therapies: Physical Therapy, Occupational Therapy, Speech Therapy, Psychology (Medicaid state funded)	• On-going therapies that are provided directly to the person are funded through the individual's State Plan Medicaid Card or, if the individual is school-aged, through the local school district, and are **not** funded under IDGS.
Experimental Therapies	• Experimental therapies are not reimbursable in any clinical category within IDGS and are not a permitted expense in the OTPS payment category.